

**PREMIER 700 PLUS PLAN
INSURED BENEFITS – PRE-EXISTING CONDITIONS, LIMITATION, & EXCLUSIONS**

Insured Benefits Underwritten by United States Fire Insurance Company, US033470.

IN-HOSPITAL BENEFITS

Hospital Room & Board and General Nursing Services: **\$700 per day**
Subject to the Semi-Private Room Rate

Intensive Care Unit (ICU) and Cardiac Care Unit (CCU): **\$1,000 per day**

Maximum Benefit for ALL Hospital Room & Board or ICU/CCU Confinements: 31 days per Policy Year

"Hospital" means an institution which is operated pursuant to its license and is primarily and continuously engaged in providing medical care and treatment to sick and injured persons. The institution must:

- (1) Maintain a staff of one or more duly licensed Doctors;
- (2) Provide 24-hour nursing service by or under the supervision of a graduate registered nurse, (R.N.);
- (3) Have medical, diagnostic and treatment facilities, and surgical facilities to care for persons on an inpatient basis on its premises or available to it on a prearranged basis; and
- (4) Keep medical records.

Hospital includes a government hospital or a government-sponsored or supported hospital.

"Hospital" does *not* include:

- (1) A clinic or facility for:
 - (a) Convalescent, custodial, educational or nursing care; or
 - (b) The aged, drug addicts or alcoholics.

Pre-Existing Conditions Limitation

Benefits are not provided for any loss caused by, or resulting from, a Pre-existing Condition, as defined, unless the loss is incurred at least 12-months after the Effective Date of coverage for a Covered Person.

Benefits are not provided for any loss caused by, or resulting from, a Pre-existing Condition, as defined. This provision does not apply to newborn or newly adopted children. The definition of a Pre-existing Condition can be found in the DEFINITIONS section of the complete policy.

Limitations And Exclusions

Benefits will not be paid for charges or loss caused by, or resulting from, any of the following:

- (1) Suicide while sane, or any intentionally self-inflicted Injury;
- (2) Any drug, narcotic, gas or fumes, or chemical substance voluntarily taken, administered, absorbed or inhaled unless prescribed by, and taken according to the directions of, a Doctor (accidental ingestion of a poisonous substance is not excluded.);
- (3) Commission, or attempt to commit, a felony;
- (4) Participation in a riot or insurrection;
- (5) Driving under the influence of a controlled substance, unless administered on the advice of a Doctor;
- (6) Driving while Intoxicated. "Intoxicated" will have the meaning determined by the laws in the jurisdiction of the geographical area where the loss occurs.
- (7) Declared or undeclared war or act of war;
- (8) Nuclear reaction or the release of nuclear energy. However, this exclusion will not apply if the loss is sustained within 180-days of the initial incident and (1)The loss was caused by fire, heat, explosion or other physical trauma which was a result of the release of nuclear energy; and (2) The Covered Person was within a 25-mile radius of the site of the release either:

- (a) At the time of the release; or
- (b) Within 24-hours of the start of the release; or
- (c) Occurs while he is in the issue state of this Certificate;
- (9) Routine health checkups or immunizations for Covered Person aged 6 and older; expenses for allergies, allergy serum or allergy testing, unless specifically provided for in this Certificate;
- (10) Surgery to correct vision or hearing; eyeglasses, contact lenses and hearing aids, braces, appliances, or examinations or prescriptions therefore;
- (11) Dental care, x-rays, or treatment other than Injury to sound, natural teeth and gums resulting from an accidental Injury and rendered within 6-months of the Injury;
- (12) Spinal manipulations and manual manipulative treatment or therapy;
- (13) Weight loss or modification and complications arising there from, including surgery and any other form of treatment for the purpose of weight loss or modification;
- (14) Rest cures or custodial care, or treatment of sleep disorders;
- (15) Treatment, services or supplies received outside of the U.S. except for acute Sickness or Injury sustained during the first 30-days of travel outside the U.S.;
- (16) Normal pregnancy or childbirth, except for Complications of Pregnancy;
- (17) Any drug, treatment, or procedure that either promotes or prevents conception or childbirth regardless of what the drug, treatment, or procedure was originally prescribed or intended for;
- (18) Blood or Blood plasma, except for charges by a Hospital for the processing or administration of blood;
- (19) Treatment of temporomandibular joint (TMJ) disorders involving the installation of crowns, pontics, bridges or abutments, or the installation, maintenance or removal of orthodontic or occlusal appliances or equilibration therapy;
- (20) Cosmetic surgery. This Exclusion does not apply to reconstructive surgery:
 - (a) On an injured part of the body following trauma, infection or other disease of the involved part;
 - (b) Of a congenital disease or anomaly of a covered dependent newborn or adopted infant; or
 - (c) On a non-diseased breast to restore and achieve symmetry between two breasts following a covered Mastectomy;
- (21) The repair or replacement of existing artificial limbs, orthopedic braces, or orthotic devices; dentures, partial dentures, braces or fixed or removable bridges;
- (22) Treatment or removal of warts, moles, boils, skin blemishes or birthmarks, bunions, acne, corns, calluses, the cutting and trimming of toenails, care for flat feet, fallen arches or chronic foot strain;
- (23) Personal items such as television, telephone, lotions, shampoos, extra beds, meals for guests, take home items, or other items for comfort and convenience;
- (24) Treatment of Mental or Nervous Disorders, or alcohol or substance abuse, unless specifically provided for under this Certificate;
- (25) Prescription medicines, unless specifically provided for under this Certificate;
- (26) Any Injury that is caused by flight or travel in, or upon:
 - (a) An aircraft or other, craft designed for navigation above or beyond the earth's atmosphere except as a fare-paying passenger;
 - (b) An ultra light, hang-gliding, parachuting or bungee-cord jumping;
 - (c) A snowmobile;
 - (d) Any two or three wheeled motor vehicle;
 - (e) Any off-road motorized vehicle not requiring licensing as a motor vehicle;
 - (f) Any watercraft or other craft designed for water use above or beneath the water, except as a fare-paying passenger;
- (27) Any accidental Injury where the Covered Person is the operator of a motor vehicle and does not possess a current and valid motor vehicle operator's license;
- (28) Services, treatment or loss:
 - (a) Payable by any automobile insurance policy without regard to fault. (Does not apply in any state where prohibited);
 - (b) Provided by a Doctor, Nurse or any other person who is employed or retained by a Covered Person or who is a member of a Covered Person's Immediate Family;
 - (c) Covered by state or federal worker's compensation, employers liability, occupational disease law, or similar laws;
 - (d) Injury or Sickness sustained while on active duty in the armed forces of any country. This does not include Reserve or National Guard duty for training. Upon receipt of proof of service, we will refund, any unearned premium paid on a pro rata basis;
- (29) Hemorrhoids, tonsils, adenoids, middle ear disorders, any disease or disorder of the reproductive organs unless the loss is incurred at least 6-months after the Covered Person becomes insured under this Certificate;
- (30) Elective treatment or surgery and treatment, procedures, products or services that are experimental or investigative. "Experimental or Investigative" means a drug, device or medical treatment or procedure that:
 - (a) Cannot lawfully be marketed without approval of the United States Food and Drug Administration and approval for marketing has not been given at the time of being furnished;

- (b) Has Reliable Evidence indicating it is the subject of ongoing clinical trials or is under study to determine its maximum tolerated dose, toxicity, safety, efficacy, or its efficacy as compared with the standard means of treatments or diagnosis; or
- (c) Has Reliable Evidence indicating that the consensus of opinion among experts is that further studies or clinical trials are necessary to determine its maximum tolerated dose, toxicity, efficacy, or its efficacy as compared with the standard means of treatment or diagnosis. "Reliable Evidence" means (i) published reports and articles in authoritative medical and scientific literature; (ii) the written protocol(s) of the treating facility or the protocols of another facility studying substantially the same drug, device, medical treatment or procedure; or (iii) the written informed consent used by the treating facility or by another facility studying substantially the same drug, device, or medical treatment or procedure.

ACCIDENT MEDICAL EXPENSE

Benefit Amount: \$25,000 per Policy Year

Deductible: \$1,000 (Accident Only)

If, as a result of injury, a Covered Person requires Medically Necessary care by a Doctor for treatment, services and supplies starting within 30 days from the date of the accident causing the injury, we will pay, less the deductible and not to exceed the maximum benefit amount shown above, all covered expenses incurred within one year from such date.

Covered expenses mean the usual, reasonable and customary charges for services and supplies provided or prescribed by a Doctor, which include the following:

- (1) Hospital Room & Board, or Surgical Center care and treatment;
- (2) Outpatient Hospital Emergency Room;
- (3) Surgical Benefits;
- (4) Doctor's Visits In-Hospital;
- (5) Doctor Visits Out-Patient;
- (6) X-ray and Laboratory;
- (7) Nursing care;
- (8) Physiotherapy;
- (9) Ambulance;
- (10) Medical Equipment Rental Charges;
- (11) Medical Services and Supplies (Blood, Blood Transfusions, Oxygen);
- (12) Prescription Drugs;
- (13) Dental Treatment as a result of Injury to Natural Teeth.

Injury means bodily harm caused by an accident, directly and independently of Sickness or bodily infirmity, resulting in unforeseen trauma requiring immediate medical attention. The Injury must occur after the Covered Person's Effective Date of coverage and while such person's coverage is in force. All injuries to the same Covered Person sustained in any one accident, including all related conditions and recurring symptoms of the Injuries, will be considered one Injury.

ACCIDENTAL DEATH & DISMEMBERMENT

Benefit Amount Accidental Death & Dismemberment:

\$50,000 (Principal Sum)

If a Covered Person sustains a covered Injury that results in Loss (as shown below) within 365 days of the Injury, benefits are payable for the percentage of the Principal Sum set opposite the Loss in the table below.

We will pay benefits only one time under this benefit for each Covered Person. If a Covered Person sustains more than one Loss as the result of separate accidental Injuries, we will pay only one benefit amount, the first one for which a claim is submitted and to which such person is entitled. If a Covered Person sustains more than one Loss as the result of any one accidental Injury, we will pay only one benefit amount, the largest to which such person is entitled. We must receive due proof that the Covered Person's Loss occurred while this benefit is in force.

<u>Description Of Loss</u>	<u>Percentage Of Principal Sum</u>
Loss of Life	100%
Loss of Both Hands	100%
Loss of Both Feet	100%
Loss of the Entire Sight of Both Eyes	100%

Loss of One Hand and One Foot	100%
Loss of One Hand and the Entire Sight of One Eye	100%
Loss of One Foot and the Entire Sight of One Eye	100%
Loss of Speech and Hearing (both ears)	100%
Loss of One Hand	50%
Loss of One Foot	50%
Loss of the Entire Sight of One Eye	50%
Loss of Speech	50%
Loss of Hearing (both ears)	50%
Loss of Thumb and Index finger of the Same Hand	25%

Pre-Existing Conditions Limitation

Benefits are not provided for any loss caused by, or resulting from, a Pre-existing Condition, unless the loss is incurred at least 12-months after the Effective Date of coverage for a Covered Person.

Benefits are not provided for any loss caused by, or resulting from, a Pre-existing Condition, as defined.

Pre-existing Condition means a medical condition, Injury or Sickness, not excluded by name or specific description, for which Medical advice, Consultation, care or treatment was recommended by, or received from, a Doctor within the 12 months immediately prior to the Effective Date of coverage for a Covered Person.